FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| (Print or Ty | pe Response | s) | | | | | | | | | | | | |
|---|---|----------------|---|--|--------------------|-------|--|--------------------------------------|---|---|----------------|--|--|--|
| 1. Name and Address of Reporting Person* WELLS WALTER E | | | | 2. Issuer Name and Ticker or Trading Symbol PATRICK INDUSTRIES INC [PATK] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) 107 W. FRANKLIN ST | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/16/2018 | | | | | | Office | r (give title belo | (w) | Other (specify b | elow) | |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| ELKHAI | RT, IN 465 | 515 | | | | | | | | | od by More man | One Reporting I | CISOII | |
| (City | r) | (State) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Code (Instr. 8) | | on 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of (D) | D) Beneficially Owned Following Reported Transaction(s) | | Following (s) | Ownership Form: | Beneficial |
| | | | | | Code | V | Amour | (A) or | Price | (Instr. 3 a | nd 4) | | | Ownership (Instr. 4) |
| Common | Stock | | 05/16/2018 | | A | | 1,670 | | \$ 0 (1) | 68,030 | <u>(2)</u> | | D | |
| | | | | Derivative Securit | | the f | tained i form di isposed | n this for splays a of, or Ben | rm are curre neficial | e not requ ntly valid | | spond unle | ss | 1474 (9-02) |
| 1. Title of | 2 | 3. Transaction | 1 | e.g., puts, calls, w | 5. | _ | ate Exe | | | itle and | 8 Price of | 9. Number o | of 10. | 11. Nature |
| | Conversion or Exercise Price of Derivative Security | Date | Year) Execution Da | te, if Transaction Code Year) (Instr. 8) | Number and | | Month/Day/Year) | | Ame Und Seco | ount of derlying urities tr. 3 and | | Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownersh Form of Derivating Security Direct (I or Indire | of Indirect Beneficial Ownershi (Instr. 4) |
| | | | | Code V | (A) (D) | | e rcisable | Expiratio Date | n Title | Amount or Number of Shares | | | | |

Reporting Owners

| D (O N (| Relationships | | | | | | |
|---|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| WELLS WALTER E 107 W. FRANKLIN ST ELKHART, IN 46515 | X | | | | | | |

Signatures

| /s/ Walter E. Wells by Joshua A. Boone, attorney-in-fact | 05/18/2018 |
|--|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Annual Director's Stock Grant awarded on May 16, 2018 and vesting on May 16, 2019.
- (2) The Common Stock holding reported herein has been adjusted to reflect a three-for-two stock split paid by the issuer on December 8, 2017.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.